



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: B19-002433

Building Address: 9501 Old Annapolis Rd
 City: ELLCOTT CITY State: MD Zip Code: 21042
 Suite/Apt. # 200A SDP/WP/BA #: _____
 Subdivision: _____
 Lot: _____ Tax Map: _____ Parcel: _____

Property Owner's Name: CHRIS HOLTEN
 Address: _____
 City: RESTON State: VA Zip Code: _____
 Phone: 703-464-0013 Fax: _____
 Email: cholden@holladaypop.com

Existing Use: Dental Office
 Proposed Use: Dental office
 Estimated Construction Cost: \$ 38,000
 Description of Work: Renovate portion of an existing Dental office to add 2 treatment rooms and 1 private office.

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: YBM CONSTRUCTION
 Address: 604 S. FREDERICK AVE #415
 City: CATHYBOWIS State: MD Zip Code: 20877
 Phone: 301-947-0471 Fax: 301-947-0474
 Email: ben@ybmconstruction.com

Occupant/Tenant Name: Dr. Hee Jung Kim
 Was tenant space previously occupied? Yes No
 Contact Name: Dr. Kim
 Address: 9501 Old Annapolis Rd #200A
 City: ELLCOTT CITY State: MD Zip Code: 21042
 Phone: (443) 878-0710 Fax: _____
 Email: KORTHUS@YANCO.COM

Contractor Company: YBM CONSTRUCTION
 Contact Person: Ben Bashiri
 Address: 604 S. FREDERICK AVE #415
 City: CATHYBOWIS State: MD Zip Code: 20877
 License No.: 15459252
 Phone: 301-947-0471 Fax: 301-947-0474
 Email: ben@ybmconstruction.com

Engineer/Architect Company: YBM CONSTRUCTION INC
 Responsible Design Prof.: YBM CONSTRUCTION
 Address: 604 S. FREDERICK AVE #415
 City: CATHYBOWIS State: MD Zip Code: 20877
 Phone: 301-947-0471 Fax: 301-947-0474
 Email: ben@ybmconstruction.com

Commercial Building Characteristics	Residential Building Characteristics	
Height: <u>45</u>	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories: <u>3</u>	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
Area of construction (sq. ft.): <u>500</u>	2 nd floor:	
Use group: <u>B</u>	Basement:	
Construction type: <u>TB</u>	<input type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement	
<input checked="" type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Wood Frame	No. of Bedrooms:	
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>	
	No. of efficiency units:	
	No. of 1 BR units:	
	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

RECEIVED

JUL 24 2019

LICENSES & PERMITS DIVISION

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION, UNLESS THE HOWARD COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: Ben Bashiri
 Email Address: ben@ybmconstruction.com
 Title/Company: President / YBM CONSTRUCTION INC

Print Name: Ben Bashiri
 Date: 7/22/19

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>8/6/19</u>	<u>H. Oswalt</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$	<u>200.00</u>
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub- Total Paid	\$	
Balance Due	\$	
Check	#	<u>64.00</u>